Fill in this information to identify your case:								
Debtor 1	Gina J Cosentino							
Debtor 2 (Spouse, if filing)								
United States B	ankruptcy Court for the:	Southern District of New York						
Case number (if known)								

Check one box only as directed in this form and in Fo	orm
122A-1Supp:	

- 1. There is no presumption of abuse
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).
- □ 3. The Means Test does not apply now because of qualified military service but it could apply later.

Column B

☐ Check if this is an amended filing

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
 - Not married, Fill out Column A, lines 2-11.
 - ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
 - ☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
 - ☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Column A

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Debto	r 1	Debtor 2 or non-filing spouse	
Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).				
 Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 			\$	
rt. Include regular contributions ld, your dependents, parents,	\$	0.00	\$	
, or farm				
Debtor 1				
\$0.00				
-\$ 0.00				
arm \$ 0.00 Copy here -	> \$	0.00	\$	
Debtor 1				
\$ 0.00				
-\$ 0.00				
\$ 0.00 Copy here ->	> \$	0.00	\$	
	\$	0.00	\$	
	paid for household expenses rt. Include regular contributions old, your dependents, parents, spouse only if Column B is not n, or farm Debtor 1 \$ 0.00 -\$ 0.00 Copy here -> Debtor 1 \$ 0.00 -\$ 0.00 Copy here ->	paid for household expenses rt. Include regular contributions old, your dependents, parents, spouse only if Column B is not spouse only if Column B is not n, or farm Debtor 1 \$ 0.00 -\$ 0.00 Copy here -> \$ Debtor 1 \$ 0.00 -\$ 0.00 Copy here -> \$	the payments from a spouse if paid for household expenses rt. Include regular contributions old, your dependents, parents, spouse only if Column B is not n, or farm Debtor 1 \$ 0.00 -\$ 0.00 copy here -> \$ 0.00 Debtor 1 \$ 0.00 -\$ 0.00 Copy here -> \$ 0.00 Copy here -> \$ 0.00 Copy here -> \$ 0.00	

Case number (if known)

Gina J Cosentino Debtor 1

			Column A Debtor 1		Column B Debtor 2 or non-filing spouse			
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amour the Social Security Act. Instead, list it here:	nt received was a benef	fit under					
	For you S	0.	00					
_	For your spouse							
	Pension or retirement income. Do not include any a benefit under the Social Security Act.			\$	0.00	\$		
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against hu domestic terrorism. If necessary, list other sources on total below.	Security Act or paymer imanity, or international	nts I or					
	·			\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add li each column. Then add the total for Column A to the to		\$	3,150.00	+		= \$ 3,150.00	
							Total current monthly	
Part	2: Determine Whether the Means Test Applies	to You					income	
12.	Calculate your current monthly income for the yea	r. Follow these steps:						
	12a. Copy your total current monthly income from line	11		Сору	line 11 h	ere=>	\$3,150.00	
	Multiply by 12 (the number of months in a year)						x 12	
	12b. The result is your annual income for this part of the	ne form				12b.	\$37,800.00	
13.	Calculate the median family income that applies to	you. Follow these step	os:					
	Fill in the state in which you live.	NY						
	Fill in the number of people in your household.	1						
	Fill in the median family income for your state and size					13.	\$ 52,024.00	
	To find a list of applicable median income amounts, go for this form. This list may also be available at the ban	o online using the link s kruptcy clerk's office.	pecified	in the separa	te instruct	ions		
14.	How do the lines compare?							
	Line 12b is less than or equal to line 13. CGo to Part 3.	On the top of page 1, ch	neck box	1, There is n	o presum	otion of abuse		
	14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	, The pr	esumption of	abuse is d	determined by	Form 122A-2.	
Part	3: Sign Below							
	By signing here, I declare under penalty of perjur	y that the information or	n this st	atement and i	n any atta	chments is tru	e and correct.	
	X /s/ Gina J Cosentino							
	Gina J Cosentino							
	Signature of Debtor 1							
Date November 20, 2017 MM / DD / YYYY								
If you checked line 14a, do NOT fill out or file Form 122A-2.								
	If you checked line 14b, fill out Form 122A-2 and file it with this form.							

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Debtor 1 Gina J Cosentino Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period **05/01/2017** to **10/31/2017**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Paychecks

Year-to-Date Income:

Starting Year-to-Date Income: \$12,750.00 from check dated 4/30/2017. Ending Year-to-Date Income: \$31,650.00 from check dated 10/31/2017.

Income for six-month period (Ending-Starting): \$18,900.00.

Average Monthly Income: \$3,150.00.